



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C121478

1. DATE OF REPORT 2/25/2013	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	
3. COMMITTEE MAILING ADDRESS 1400 FORUM BLVD STE C-1#366 CITY / STATE / ZIP COLUMBIA MO 65203	4. COMMITTEE TELEPHONE NUMBER (573) 239-7916
5. TREASURER'S NAME RICHARD KING	
6. TREASURER'S MAILING ADDRESS 109 WEST PARKWAY CITY / STATE / ZIP COLUMBIA MO 65203	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 875-3640 WORK: (573) 874-1944
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER VICKI HOBBS	
9. DEPUTY TREASURER'S MAILING ADDRESS 4001 SOUTH COATS LANE COLUMBIA MO 65203 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 445-4940 WORK: (573) 289-4067
11. DATE OF ELECTION 4/2/2013	12. TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 12/3/2012 THROUGH 2/16/2013	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY IAN THOMAS 2616 HILLSHIRE DRIVE COLUMBIA MO 65203 (573) 239-7916 COUNCIL PERSON CITY OF COLUMBIA <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input checked="" type="checkbox"/> NON-PARTISAN	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input checked="" type="checkbox"/> OTHER AMENDED 40 Day Before General Municipal Ele <input checked="" type="checkbox"/> AMENDING PREVIOUS REPORT DATED February _____, 2013
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Feb 25 2013 5:19PM _____ TREASURER'S SIGNATURE	17. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Feb 25 2013 5:19PM _____ CANDIDATE'S SIGNATURE



**MISSOURI ETHICS COMMISSION
EXPLANATION FOR AMENDED REPORT**

OFFICE USE ONLY

MEC ID #: C121478

This form is to be used when amending a previously filed Campaign Finance Disclosure Report.

1. Name of Committee

IAN THOMAS FOR 4TH WARD

2. Date of Report

2/25/2013

3. Type and Date of Previously Filed Report

02/25/2013 AMENDED 40 Day Before General Municipal Election-4/2/2013

4. Reason for Amendment

Incorrect address listed for donor

5. Amendment Detail

Itemized Contributions Received
Modified-Darwin and Elisabeth Hindman



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
IAN THOMAS FOR 4TH WARD	2/25/2013	

Receipts	A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported		\$ 0.00		
2. All Monetary Contributions Received This Period	\$ 15,866.00			
3. All Loans Received This Period	+ 0.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 15,866.00			
6. In-kind Contributions Received This Period	+ 404.22			
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 16,270.22			
8. Total All Receipts This Election (Sum 1B + 7A)		\$ 16,270.22		
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported		\$ 0.00		
10. Expenditures made by cash or check this period	\$ 1,836.37			
11. In-Kind Expenditures made this period	+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)	+ 500.00			
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 2,336.37			
14. Total Expenditures This Election (Sum 9B + 13A)		\$ 2,336.37		
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported		\$ 0.00		
16. All Contributions Made This Period (25A or 25B of CD3)	A 0.00	← Cash/Check		
	B 0.00	← Credit Card		
17. All In-Kind Contributions Made This Period	+ 0.00			
18. Total Contributions Made This Period (Sum 16A + 17A)	\$ 0.00			
19. Total All Contributions Made This Election (Sum 15B + 18A)		\$ 0.00		
Other Disbursements	A. This Period	B. This Calendar Yr or Election Cycle		
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 0.00			
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)	+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 0.00			
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)	\$ 0.00			
			Money On Hand	
			24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 0.00
			25. Monetary Receipts this Period (From Item 5 - this page)	+ 15,866.00
			26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check \$ 1,836.37 b) Disbursements By Cash \$ 0.00	- 1,836.37
			27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 14,029.63
			Indebtedness	
			28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
			29. Loans Received This Period	+ 0.00
			30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 500.00
			B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
			31. Payments Made on Loans This Period	- 0.00
			32. Debt Forgiven on Loans This Period	- 0.00
			33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
			34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 500.00



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD		2. REPORT DATE 2/25/2013	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 0.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 16,270.22	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 16,270.22	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 15,866.00	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$ 404.22	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$ 0.00	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ 0.00	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 0.00	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ 0.00	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 0.00	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 0.00	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 404.22	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 15,866.00	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 15,866.00	



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Ian Thomas CITY / STATE: 2616 Hillshire Columbia MO 65203 EMPLOYER: Pednet -- Director <input type="checkbox"/> COMMITTEE:	12/3/2012 ----- \$ 33.00	\$ 33.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Ian Thomas CITY / STATE: 2616 Hillshire Columbia MO 65203 EMPLOYER: Pednet -- Director <input type="checkbox"/> COMMITTEE:	12/10/2012 ----- \$ 1,033.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lawrence Lile CITY / STATE: 7425 E Rte Y Ashland MO 65010 EMPLOYER: Lile Engineering LLC -- Engineer <input type="checkbox"/> COMMITTEE:	12/10/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marcella Snakenberg CITY / STATE: 5001 Daphine Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/10/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Bauer & Charles Curtis CITY / STATE: 1016 LaGrange Ct Columbia MO 65203 EMPLOYER: Self-employed -- Psychologist <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Almony CITY / STATE: 301 Rothwell Dr Columbia MO 65203 EMPLOYER: Self-employed -- Financial Advisor <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Herbert & Susan Tillema CITY / STATE: 306 Westridge Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard & Susan Burns CITY / STATE: 117 W Burnam Rd Columbia MO 65203 EMPLOYER: Truman Veterans Hospital -- Physician <input type="checkbox"/> COMMITTEE:	12/12/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION

CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Mehdi & Melinda Farhangi CITY/STATE: 2602 Luan Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/12/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen & Joan Mudrick CITY/STATE: 1015 Prospect St Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/12/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rolling Hills Veterinary Hospital CITY/STATE: 210 S Keene EMPLOYER: Columbia MO 65201 <input type="checkbox"/> COMMITTEE:	12/12/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Riddick CITY/STATE: 602 Rollins Ct Columbia MO 65203 EMPLOYER: Application Software Inc -- President <input type="checkbox"/> COMMITTEE:	12/13/2012 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jian Dong Qu CITY/STATE: 1413 Ross St Columbia MO 65201 EMPLOYER: Univ of MO -- Net Administrator <input type="checkbox"/> COMMITTEE:	12/13/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve Scott CITY/STATE: 201 Westwood Ave Columbia MO 65203 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	12/14/2012 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Lehman CITY/STATE: Stoney Creek Inn Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/14/2012 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jonathan & Marianne Erickson CITY/STATE: 3706 Chinkapin Ct Columbia MO 65203 EMPLOYER: Univ of MO -- Microbiologist <input type="checkbox"/> COMMITTEE:	12/14/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Karl Kruse & Ilalyn Irwin CITY / STATE: 2405 Lynnwood Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/15/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bridget Murphy & Dean Hargett CITY / STATE: 801 Westport Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Coordinator <input type="checkbox"/> COMMITTEE:	12/15/2012 \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Philip & Kathryn Sapp CITY / STATE: 5511 Dalcross Dr Columbia MO 65203 EMPLOYER: CenturyLink -- Engineer <input type="checkbox"/> COMMITTEE:	12/17/2012 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wiley Miller CITY / STATE: 1911 Dartmouth Columbia MO 65203 EMPLOYER: Self-employed -- Psychologist <input type="checkbox"/> COMMITTEE:	12/18/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peter & Susan Neenan CITY / STATE: 300 Rustic Rd Columbia MO 65201 EMPLOYER: Makes Scents -- Owner <input type="checkbox"/> COMMITTEE:	12/18/2012 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard & Patti King CITY / STATE: 109 West Parkway Columbia MO 65203 EMPLOYER: Self-employed -- Business Owner <input type="checkbox"/> COMMITTEE:	12/18/2012 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Troy & Carey Balthazor CITY / STATE: 502 N West Blvd Columbia MO 65201 EMPLOYER: Univ of MO -- Training Specialist <input type="checkbox"/> COMMITTEE:	12/20/2012 \$ 125.00	\$ 125.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James & Christiane Quinn CITY / STATE: 719 W Broadway Columbia MO 65203 EMPLOYER: Univ of MO Extension -- Horticulture Specialist <input type="checkbox"/> COMMITTEE:	12/26/2012 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Chip & Jane Cooper CITY / STATE: 500 Longfellow Ln Columbia MO 76304 EMPLOYER: MO Innovation Center -- Director <input type="checkbox"/> COMMITTEE:	12/26/2012 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Don & Robin Tillitt CITY / STATE: 1251 Idle Hour Ln Fulton MO 65251 EMPLOYER: US Geological Survey -- Biologist <input type="checkbox"/> COMMITTEE:	12/28/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Frank & Beth Cunningham CITY / STATE: 1112 Pheasant Run Columbia MO 65201 EMPLOYER: Self-employed -- Videographer <input type="checkbox"/> COMMITTEE:	12/28/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dale Brigham CITY / STATE: 2202 Hillshire Ct Columbia MO 65201 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	12/28/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Frank Morris CITY / STATE: 1217 Rogers St Columbia MO 65201 EMPLOYER: Walt's Bike Shop -- Business Owner <input type="checkbox"/> COMMITTEE:	12/28/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cathy Rosenholtz & Fred Schmidt CITY / STATE: 110 Anderson Ave Columbia MO 65203 EMPLOYER: Self-emp -- Accountant <input type="checkbox"/> COMMITTEE:	1/3/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stacey & Darin Preis CITY / STATE: 4803 Chilton Ct Columbia MO 65203 EMPLOYER: Central MO Community Action -- Exec Dir <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Simon Rose CITY / STATE: 2204 Katy Ln Columbia MO 65203 EMPLOYER: KBXR Radio -- Radio host <input type="checkbox"/> COMMITTEE:	1/6/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Jenna Higgins Rose CITY/STATE: 2204 Katy Ln Columbia MO 65203 EMPLOYER: Rose Media LLC -- Communications <input type="checkbox"/> COMMITTEE:	1/6/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen Sayers CITY/STATE: 308 Bright Star Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Assoc Prof <input type="checkbox"/> COMMITTEE:	1/6/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Joane OConnor CITY/STATE: 2401 Tahoe Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/6/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Christopher Fulcher CITY/STATE: 2712 Bayonne Ct Columbia MO 65203 EMPLOYER: Center for Applied Research -- Co-Director <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Lottes CITY/STATE: 10201 Burnett Sch Rd Ashland MO 65010 EMPLOYER: Self-Employed -- Advocate <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Executive Assistant Service LLC CITY/STATE: 5012 Gasconade Dr Columbia MO 65202 EMPLOYER: <input type="checkbox"/> COMMITTEE:	1/10/2013 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Bedan CITY/STATE: 2001 Chapel Wood Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kay Callison CITY/STATE: 600 Crestland Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
--	-------------------

INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Sylvia Noel CITY / STATE: 509 Westmount Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Pack Matthews CITY / STATE: 1108 Chantilly Ct Columbia MO 65203 EMPLOYER: Self-employed -- Piano Tuner <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Trevor Harris & Lisa Groshong CITY / STATE: 1201 B Sunset Ln Columbia MO 65203 EMPLOYER: Univ of MO -- Radio Announcer <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margie Sable CITY / STATE: 228 E Parkway Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrea Fischer CITY / STATE: 8 E Parkway Dr Columbia MO 65203 EMPLOYER: Truman VA Hospital <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael & Erin Barbaro CITY / STATE: 406 Pyrenees Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Geographer <input type="checkbox"/> COMMITTEE:	1/10/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bob & Jerena Harris CITY / STATE: 2505 E Broadway Columbia MO 65201 EMPLOYER: Self-employed -- Physician <input type="checkbox"/> COMMITTEE:	1/10/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Elliott CITY / STATE: 402 Westmount Ave Columbia MO 65203 EMPLOYER: Self-employed -- Physician <input type="checkbox"/> COMMITTEE:	1/12/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Ian Thomas CITY / STATE: 2616 Hillshire Columbia MO 65203 EMPLOYER: PedNet -- Consultant <input type="checkbox"/> COMMITTEE:	1/12/2013 ----- \$ 1,133.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan Viets CITY / STATE: 15 N Tenth St Columbia MO 65201 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	1/13/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sarah Martin CITY / STATE: 4102 Federer St Louis MO 63116 EMPLOYER: Self-employed -- Consultant <input type="checkbox"/> COMMITTEE:	1/14/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Axie Hindman CITY / STATE: 1223 Frances Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 11.22	\$ 11.22 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Arthur & Sheryl Mehrhoff CITY / STATE: 2001 Sunborough Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Museum Coordinator <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 24.00	\$ 24.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brent Gardner CITY / STATE: 315 W Stewart Rd Columbia MO 65203 EMPLOYER: ReMAX Boone Realty -- Realtor <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tanya Christiansen & Dan Edidin CITY / STATE: 2601 Summit Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 40.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janet Tanski & Dan French CITY / STATE: 1004 Hulen Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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NAME: ADDRESS: Janice Gaston CITY / STATE: 920 Edgewood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Hal & Mary Williamson CITY / STATE: 1112 S Genwood Ave Columbia MO 65203 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Otto Fajen & Lisa Boyer CITY / STATE: 409 W Briarwood Columbia MO 65203 EMPLOYER: MO National Education Assn -- Legislative Director <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laura McCann CITY / STATE: 2205 Kyle Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Assoc Prof <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laura Perez-Mesa CITY / STATE: 609 Stewart Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David & Martha Lile CITY / STATE: 112 Crestmere Ave Columbia MO 65203 EMPLOYER: KFRU -- Radio host <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laurie Kingsley CITY / STATE: 717 Westport Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Assoc Prof <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ian Thomas CITY / STATE: 2616 Hillshire Dr Columbia MO 65203 EMPLOYER: PedNet -- Consultant <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 1,233.00	\$ 100.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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NAME: ADDRESS: Michael Burden CITY / STATE: 1011 Again St Columbia MO 65203 EMPLOYER: Univ of MO -- Information Specialist <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Martin Wills CITY / STATE: 3011 Alsup Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Internet Specialist <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rosalie Gerding CITY / STATE: 101 S Fifth St Columbia MO 65201 EMPLOYER: Gerding Korte & Chitwood -- CPA <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael Calcutt CITY / STATE: 1301 Roseview Dr Jefferson City MO 65101 EMPLOYER: Univ of MO -- Assoc Prof <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Virginia Muller CITY / STATE: 101 Edgewood Columbia MO 65203 EMPLOYER: Univ of MO -- Asst Prof <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Don & Marie Scruggs CITY / STATE: 1913 Vassar Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mike Sleadd & Barbara Hoppe CITY / STATE: 607 Bluff Dale Dr Columbia MO 65203 EMPLOYER: Columbia College -- Professor <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kathleen Weinschenk CITY / STATE: 1504 Sylvan Ln Columbia MO 65203 EMPLOYER: Not employed <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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NAME: ADDRESS: Diane Booth & Jeanne Sebaugh CITY/STATE: 3609 Holly Hills Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chuck & Jan Swaney CITY/STATE: 2709 Westbrook Way Columbia MO 65203 EMPLOYER: Radiology Consultants -- Radiologist <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cande Iveson CITY/STATE: 205 E Ridgeley Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Clinical Instructor <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Darwin & Axie Hindman CITY/STATE: 1223 Frances Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg & Julie Baka CITY/STATE: 314 West Blvd N Columbia MO 65203 EMPLOYER: Self-employed -- Business Owner <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dory Colbert Design LLC CITY/STATE: PO Box 993 Columbia MO 65205 EMPLOYER: <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lynn Hostetler CITY/STATE: 1204 Hulen Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael & Sarah Seat CITY/STATE: 1206 Sunset Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Alisa & Kevin Fritsche CITY / STATE: 2309 Kyle Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joy Amuedo & Scott Denson CITY / STATE: 1020 Yale Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael Trapp CITY / STATE: 10 E Leslie Ln Columbia MO 65203 EMPLOYER: Phoenix Programs -- Program Mgr <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sally Beattie CITY / STATE: 6 Edgewood Ave Columbia MO 65203 EMPLOYER: Univ of MO Hospital -- Nurse <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sam Phillips CITY / STATE: 108 Westwood Ave Columbia MO 65203 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lisa & Michael Perry CITY / STATE: 2408 Lloyd Ct Columbia MO 65203 EMPLOYER: Edward Jones -- BOA <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mahree Skala CITY / STATE: 5201 Gasconade Dr Columbia MO 65203 EMPLOYER: Self-employed -- Health Consultant <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David & Nancy Finke CITY / STATE: 1106 Maplewood Dr Columbia MO 65203 EMPLOYER: Self-Employed -- Mortgage broker <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Sharon & Robert Schattgen CITY / STATE: 2200 Topaz Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Ed Psychologist <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ilene Ford CITY / STATE: 802D Bourn Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Aline Kultgen CITY / STATE: 1012 Hickory Hill Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Beth Pike & Frank Cunningham CITY / STATE: 1112 Pheasant Run Columbia MO 65201 EMPLOYER: Orr Street Productions -- Co-owner <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 75.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan Stapleton CITY / STATE: 118 Park Hill Ave Columbia MO 65203 EMPLOYER: Not employed <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Polansky CITY / STATE: 1009 Coats St Columbia MO 65203 EMPLOYER: Columbia Urban Agriculture -- Manager <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jack Clark CITY / STATE: 208 E Briarwood Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rashmi Srivastava & Matthew Wiksell CITY / STATE: 2805 Overhill Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 51.00	\$ 51.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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NAME: ADDRESS: Heather O'Connor CITY / STATE: 2246 Concordia Dr Columbia MO 65203 EMPLOYER: Leigers Carpentry -- Renovation specialist <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sarah Ashman & Mark Bendel CITY / STATE: 401 N 9th St Columbia MO 65201 EMPLOYER: Walt's Bike Shop -- Manager <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Amy & Scott Powell CITY / STATE: 5700 E Osage Ridge Ln Columbia MO 65201 EMPLOYER: Alpine Bldg <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark & Nancy Wahrenbrock CITY / STATE: 2400 Hillshire Dr Columbia MO 65203 EMPLOYER: USA/ODAR -- Attorney <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stacia Reilly CITY / STATE: 504 W Broadway Columbia MO 65203 EMPLOYER: City of Columbia -- Health Promotion Supervisor <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 175.00	\$ 175.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stacy Turpin CITY / STATE: 506 Westridge Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Medical Illustrator <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 40.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Catherine Parke CITY / STATE: 413 Thilly Ave Columbia MO 65203 EMPLOYER: Moberly Area Community College -- Teacher <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barb Tucker & Ellen Thieme CITY / STATE: 1404 Hinkson Ave Columbia MO 65201 EMPLOYER: Daniel Boone Regional Library -- Library Associate <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
--	-------------------

INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Scott Wilson & Laura Noren CITY / STATE: 2412 Meadow Lark Ln Columbia MO 65203 EMPLOYER: Hines Law Firm -- Attorney <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Schwartz CITY / STATE: PO Box 854 Columbia MO 65203 EMPLOYER: Self-Employed -- Attorney <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peggy Placier CITY / STATE: 209 S Greenwood Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg & Katherine Bergman CITY / STATE: 3805 Addison Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tim & Linda Harlan CITY / STATE: 511 S Glenwood Ave Columbia MO 65203 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kate & Scott Koerner CITY / STATE: 515 E Rockcreek Dr Columbia MO 65203 EMPLOYER: Self-Employed -- Dentist <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Terry Skinner CITY / STATE: 3716 Lansing Ave Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joan Pratt CITY / STATE: 303 S Greenwood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 35.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Tim OConnor CITY / STATE: 300 S Glenwood Ave Columbia MO 65203 EMPLOYER: Self-employed -- Physician <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrew Twaddle & Sarah Wolcott CITY / STATE: 919 Edgewood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David & Jean Goldstein CITY / STATE: 206 E Ridgeley Rd Columbia MO 65203 EMPLOYER: Retired -- Physician <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian Treece & Mary Phillips CITY / STATE: 101 W Brandon Rd Columbia MO 65203 EMPLOYER: Treece Phillips LLC -- Communications Consultant <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan Kuebler & Diane La Mar CITY / STATE: 16471 S Hawkins Rd Ashland MO 65010 EMPLOYER: Self-employed -- Physical Therapist <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephanie Dorman CITY / STATE: 2504 Oakland Gravel Rd Columbia MO 65202 EMPLOYER: Self-employed -- Teacher <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peter Gardner CITY / STATE: 803 Forest Hill Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Simon & Jenna Higgins Rose CITY / STATE: 2204 Katy Ln Columbia MO 65203 EMPLOYER: KBXR Radio -- Radio host <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 230.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Charles Reineke CITY / STATE: 105 McBaine Ave Columbia MO 65203 EMPLOYER: Univ of MO -- Editor <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Shakespeare's Pizza CITY / STATE: 3304 Broadway Business Park Ct Columbia MO 65201 EMPLOYER: Columbia MO 65201 <input type="checkbox"/> COMMITTEE:	1/17/2013 ----- \$ 140.00	\$ 140.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary & Patricia Peel CITY / STATE: 505 Loch Ln Columbia MO 65203 EMPLOYER: Univ of MO -- Business Mgr <input type="checkbox"/> COMMITTEE:	1/18/2013 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ray & Hsiao-Mei Wiedmeyer CITY / STATE: 304 S Garth Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/19/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Joane Oconnor CITY / STATE: 2401 Tahoe Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/19/2013 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Maxey CITY / STATE: 2308 Kyle Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Health Physics Tech <input type="checkbox"/> COMMITTEE:	1/19/2013 ----- \$ 51.00	\$ 51.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jack & Claudia Jensen CITY / STATE: 2504 Basswood Ct Columbia MO 65203 EMPLOYER: First Chance for Children -- Exec Dir <input type="checkbox"/> COMMITTEE:	1/19/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janice & Ray Harder CITY / STATE: 1806 Bluff Pointe Dr Columbia MO 65201 EMPLOYER: Dan Harder ReMAX -- Realtor <input type="checkbox"/> COMMITTEE:	1/19/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
--	-------------------

INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Joan Stack CITY/STATE: 912 Colgate Columbia MO 65203 EMPLOYER: Univ of MO -- Museum Curator <input type="checkbox"/> COMMITTEE:	1/19/2013 ----- \$ 120.00	\$ 120.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Christiane Quinn CITY/STATE: 719 W Broadway Columbia MO 65203 EMPLOYER: Univ of MO -- Coordinator <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 120.00	\$ 120.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill Burnham CITY/STATE: 1103 W Stewart Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Community Initiatives CITY/STATE: 501 Fay Street Columbia MO 65201 EMPLOYER: <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cheryl Hardy & Mark Baltzer CITY/STATE: 1605 Cunningham Rd Columbia MO 65203 EMPLOYER: Columbia College -- Teacher <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeff & Katie Harris CITY/STATE: 2400 Topaz Columbia MO 65203 EMPLOYER: Governor Jay Nixon -- Policy Director <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mehdi & Melinda Farhangi CITY/STATE: 2602 Luan Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 120.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Gowans CITY/STATE: 701 Redbud Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Steven Skolnick CITY / STATE: 804 Wingham Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carol Lane CITY / STATE: 813 Maupin Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 40.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: August Walter CITY / STATE: 15 Broadway Village Dr Columbia MO 65201 EMPLOYER: Family Counseling Center of MO -- IT Mgr <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve Weinberg CITY / STATE: 807 West Blvd S Columbia MO 65203 EMPLOYER: Self-employed -- Writer <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Henry & Kathryn Ottinger CITY / STATE: 511 Westwood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 40.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alyce Turner CITY / STATE: 1204 Fieldcrest Columbia MO 65203 EMPLOYER: State of MO -- Health <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Win Colwill CITY / STATE: 1417 N Countryshire Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/23/2013 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ava Fajen & Scott Christianson CITY / STATE: 300 S Garth Ave Columbia MO 65203 EMPLOYER: Kaleidoscope Consulting -- Business Owner <input type="checkbox"/> COMMITTEE:	1/23/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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NAME: ADDRESS: Michael & Lottie Bushmann CITY / STATE: 1902 Katy Woods Ct Columbia MO 65203 EMPLOYER: Columbia Public Schools -- Teacher <input type="checkbox"/> COMMITTEE:	1/23/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brent Lowenberg CITY / STATE: 210 Russell Blvd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/23/2013 ----- \$ 35.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Walter & Susan Melton CITY / STATE: 25 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/23/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patty Clover CITY / STATE: 915 W Rollins Rd Columbia MO 65203 EMPLOYER: Self-employed -- Store Owner <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laura & Marvin Wells CITY / STATE: 25 E Stewart Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark & Meg Milanick CITY / STATE: 702 W Rollins Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joan Watson CITY / STATE: 807 W Stewart Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis & Jeanne Murphy CITY / STATE: 208 S Garth Columbia MO 65203 EMPLOYER: Univ of MO -- Graphic Designer <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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NAME: ADDRESS: Liz Schmidt CITY/STATE: 1700 Forum Blvd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/25/2013 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeff & Trina Warder CITY/STATE: 2614 Hillshire Dr Columbia MO 65203 EMPLOYER: Columbia Public Schools -- Teacher <input type="checkbox"/> COMMITTEE:	1/25/2013 \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Frank Stack CITY/STATE: 409 Thilly Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/25/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Haim CITY/STATE: 1402 Richardson St Columbia MO 65201 EMPLOYER: Mid-MO PeaceWorks -- Director <input type="checkbox"/> COMMITTEE:	1/26/2013 \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dana Fritz CITY/STATE: 216 N Strawn Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/26/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cherise Still CITY/STATE: 2405 Lloyd Ct Columbia MO 65203 EMPLOYER: Boone Hospital -- Social Worker <input type="checkbox"/> COMMITTEE:	1/26/2013 \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Peters CITY/STATE: 305 McNab Dr Columbia MO 65201 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	1/26/2013 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carol Elliott CITY/STATE: 3719 Bray Ct Columbia MO 65203 EMPLOYER: Self-employed -- Project Mgmt <input type="checkbox"/> COMMITTEE:	1/26/2013 \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Walter Gassmann CITY / STATE: 1700 Princeton Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Assoc Prof <input type="checkbox"/> COMMITTEE:	1/27/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Amolsch CITY / STATE: 2014 Crestridge Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/28/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve Johnson CITY / STATE: 904 Maplewood Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/29/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Leuthold CITY / STATE: 2000 Valley View Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/29/2013 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Tyler CITY / STATE: 805 Edgewood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/29/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thomas & Linda LaFontaine CITY / STATE: 6307 S Old Village Rd Columbia MO 65203 EMPLOYER: Self-employed -- Exercise Physiologist <input type="checkbox"/> COMMITTEE:	1/30/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Karen Bostrom-Gregg CITY / STATE: 3815 W Rollins Rd Columbia MO 65203 EMPLOYER: Columbia Public Sch -- Educator <input type="checkbox"/> COMMITTEE:	2/2/2013 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joe & Amy Company CITY / STATE: 203 Tracy Dr Columbia MO 65203 EMPLOYER: Columbia Public Schools -- Teacher <input type="checkbox"/> COMMITTEE:	2/2/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Elizabeth Geden CITY/STATE: 2610 Hillshire Dr Columbia MO 65203 EMPLOYER: Family Health Center -- Nurse <input type="checkbox"/> COMMITTEE:	2/2/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Anne McKendry CITY/STATE: 2610 Hillshire Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	2/2/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lili Vianello CITY/STATE: 1005 Wayne Rd Columbia MO 65203 EMPLOYER: Self-employed -- Communications <input type="checkbox"/> COMMITTEE:	2/2/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Johnson CITY/STATE: 462 W Russell Barrington IL 60010 EMPLOYER: PedNet -- Dir of Consulting Services <input type="checkbox"/> COMMITTEE:	2/2/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Anne Hoylman CITY/STATE: 1900 Field Stone Ct Columbia MO 65203 EMPLOYER: Columbia Public Schools -- Teacher <input type="checkbox"/> COMMITTEE:	2/4/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Don Schilling CITY/STATE: 904 Edgewood Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/4/2013 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carmen Williams CITY/STATE: 28 E Ash St Columbia MO 65203 EMPLOYER: Russell Chapel -- Minister <input type="checkbox"/> COMMITTEE:	2/5/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jane Ellen Ashley CITY/STATE: 404 Westridge Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/6/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: David Sapp CITY / STATE: 1025 Hickory Hill Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/7/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Louis Wilson CITY / STATE: PO Box 100 Columbia MO 65205 EMPLOYER: Self-employed -- Contractor <input type="checkbox"/> COMMITTEE:	2/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kyna Byerly CITY / STATE: 1305 Wood Hill Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Counselor <input type="checkbox"/> COMMITTEE:	2/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sonya Stanis CITY / STATE: 1404 Overhill Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Asst Prof <input type="checkbox"/> COMMITTEE:	2/11/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Frances Reynolds CITY / STATE: 902 E Sunset Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/12/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Benjamin & David James CITY / STATE: 1108 S Glenwood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/12/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ken Macleod & Meera Sood CITY / STATE: 2013 Katy Ln Columbia MO 65203 EMPLOYER: Univ of MO -- Prof <input type="checkbox"/> COMMITTEE:	2/13/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kathleen Cain CITY / STATE: 603 Westwood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/13/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD	DATE 2/25/2013
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INSTRUCTIONS

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Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Ann Cohen CITY / STATE: 5800 E 22nd Ave EMPLOYER: Denver CO 80207 Univ of MO -- Extension <input type="checkbox"/> COMMITTEE:	2/14/2013 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brad & Vicki Boyd-Kennedy CITY / STATE: 504 Manor Dr EMPLOYER: Columbia MO 65203 Univ of MO -- Advisor <input type="checkbox"/> COMMITTEE:	2/15/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Fox CITY / STATE: 611 Commerce St EMPLOYER: Nashville TN 37203 McNeely Piggot & Fox -- Public Relations <input type="checkbox"/> COMMITTEE:	2/15/2013 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Parks CITY / STATE: 2501 Limerick Ln EMPLOYER: Columbia MO 65203 Emergency Physicians -- Physician <input type="checkbox"/> COMMITTEE:	2/16/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Darwin and Elisabeth Hindman CITY / STATE: 2414 Barton Ave EMPLOYER: Nashville TN 37212 Attorney <input type="checkbox"/> COMMITTEE:	2/4/2013 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 Instructions on Reverse Side

Office Use Only

1. Name of Committee IAN THOMAS FOR 4TH WARD		2. Report Date 2/25/2013	
A. Expenditures of \$100 or Less by Category (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure View Supplemental Form(s)			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 318.55
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 318.55
B. Itemized Expenditures All Over \$100 And All Payments To Campaign Workers		9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)
8. Name and Address of Recipient			11. Amount This Period
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
12. Subtotal: This Page (Sum Column 11)			\$ 0.00
13. Subtotal: Any Attached Pages			+ 2,017.82
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 2,017.82
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 2,336.37
16. Amount of Line 15 Above which was Paid Out This Period			\$ 1,836.37
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 500.00
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes to Line 5 / Part II)			\$ 0.00
C. Contributions Made (Regardless of Amount)		21. Date	22. Amount
20. Name and Address of Candidate or Committee			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 0.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



3

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD		DATE 2/25/2013
EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B)		AMOUNT PAID OR INCURRED THIS PERIOD
CATEGORY OF EXPENDITURE		
Check order	\$	23.90
Office Supplies	\$	88.32
Copies	\$	107.02
Website Hosting Fee	\$	57.06
Online fundraising fees	\$	42.25
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL: ITEMIZED EXPENDITURES THIS PAGE		
(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)	\$	--



MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE IAN THOMAS FOR 4TH WARD		REPORT DATE 2/25/2013	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS			
NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME: Hotcards ADDRESS: 1600 East 23rd St CITY/STATE: Cleveland OH 44114	1/3/2013	Printing \$ 0.00	\$ 244.08 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Witt Printing ADDRESS: 214 S Eighth St CITY/STATE: Columbia MO 65201	1/4/2013	Printing \$ 0.00	\$ 267.71 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Midwest Mail ADDRESS: PO Box 723 CITY/STATE: Columbia MO 65205	1/9/2013	Mail services \$ 0.00	\$ 747.53 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Shakespeare's Pizza ADDRESS: 3304 W Broadway CITY/STATE: Columbia MO 65203	1/17/2013	Event food \$ 0.00	\$ 120.50 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Columbia Post Office ADDRESS: 511 E Walnut St CITY/STATE: Columbia MO 65201	1/28/2013	Stamps \$ 0.00	\$ 138.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Progressive Political Partners ADDRESS: 4001 S Coats Ln CITY/STATE: Columbia MO 65203	2/16/2013	Strategic Planning & Mgmt \$	\$ 500.00 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --